FORM D		SECURITI	ES AND EXCHANG Washington, D.C.	EE COMMISSION PROCE	SSED	OMB Number: Expires: Estimated avera	
	RECEIVE		FORM Į	M) octs:	3 2005		nse16.00
<	OCT 1 2 210	PURSU	DANT TO REGUECTION 4(6), A	SECURITES OF THE SECURI			
Name of Offering Common Stock		an amendment and nar				060	49708
	k box(es) that apply):		505 × Rule 506	Section 4	(6) 🗵 ULOE	///	1881
Type of Filing:	New Filing	Amendment A	. BASIC IDENTIFI	CATION DATA		1,0	/ 30 /
1. Enter the inform	ation requested about th	ne issuer					
Name of Issuer PalletOne, Inc.		an amendment and na		ndicate change.)			
Address of Execution 1470 U.S. Highway		(No. and Street, City P.O. Box 819, Barto			Telephone N (863) 533-1	Number (Includin) 148	g Area Code)
	l Business Operations	(No. and Street, City		Telephone Nu	imber (Including /		
Brief Description o Wood Pallets	f Business						
Type of Business C	rganization						
corporation			limited partners	ship, already formed			other (please specify):
business trust			limited partners	hip, to be formed			
Actual or Estimat	ed Date of Incorporatio	n or Organization:		Month 0 8	Year 0 1	Actual	☐ Estimated
Jurisdiction of Inc	corporation or Organiza	tion: (Enter two-letter	U.S. Postal Service al	breviation for State:	DE		
		CN for Canada	; FN for other foreign	jurisdiction)			•
GENERAL INST	RUCTIONS						
Federal: Who Must File: Al 77d(6).	l issuers making an of	fering of securities in	reliance on an exemp	tion under Regulation	D or Section 4(6	5), 17 CFR 230.5	01 et seq. or 15 U.S.C.
Exchange Commis	notice must be filed no sion (SEC) on the earli was mailed by United So	er of the date it is rece	ived by the SEC at the	ie address given belov	g. A notice is do v or, if received at	eemed filed with that address afte	the U.S. Securities and r the date on which it is
Where To File: U.S	Securities and Exchan	ge Commission, 450 F	Fifth Street, N.W., Wa	shington, D.C. 20549.			
Copies Required: photocopies of the	Five (5) copies of this manually signed copy o	notice must be filed r bear typed or printed	with the SEC, one of signatures.	of which must be ma	nually signed. A	ny copies not m	anually signed must be
Information Requirements information request the SEC.	red: A new filing must of ted in Part C, and any r	ontain all information naterial changes from	requested. Amendme the information previous	ents need only report to ously supplied in Part	he name of the iss s A and B. Part E	uer and offering, and the Appendi	any changes thereto, the x need not be filed with
Filing Fee: There is	s no federal filing fee.						
that have adopted a	this form. Issuers relyi	ng on ULOE must file fee as a precondition t	e a separate notice wi to the claim for the ex	th the Securities Admemption, a fee in the particle constitutes a part of	inistrator in each proper amount sha	state where sales Il accompany this	ave adopted ULOE and are to be, or have been form. This notice shall
Failure to file appropriate fe	e notice in the app deral notice will no	ropriate states wil t result in a loss of	l not result in a an available state	loss of the federa exemption unless	l exemption. (such exemption	Conversely, fair	llure to file the on the filing of a

federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (05-05)



A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - $_{\mathbf{X}}^{\mathbf{X}}$ Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - X Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - X Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if i Howe Q. Wallace	ndividual)				
Business or Residence Address 1470 U.S. Highway 17 South	(Number and Street, C P.O. Box 819, Barto				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	⊠ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if i Holland, A. E. Jr.	ndividual)				
Business or Residence Address 1470 U.S. Highway 17 South	(Number and Street, O P.O. Box 819, Barto				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if i Forbes, Gary	ndividual)				
Business or Residence Address 2727 Allen Parkway, 13 th Floo					
Check Box(es) that Apply:	☐ Promoter		☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if i Lehmann, Nolan	ndividual)				
Business or Residence Address 16303 Sterling Gate Court, Dal		City, State, Zip Code)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if i Isaacson, Don	ndividual)				
Business or Residence Address 1470 U.S. Highway 17 South	(Number and Street, C P.O. Box 819, Barto				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if is Peterson, Jeff	ndividual)				
Business or Residence Address 12900 Preston Road, Suite 700		City, State, Zip Code)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if it Casey A. Fletcher	ndividual)				
Business or Residence Address 1470 U.S. Highway 17 South	(Number and Street, C P.O. Box 819, Barto				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if it Don Hayes	ndividual)				
Business or Residence Address P.O. Box 1218, Bartow, Florida		City, State, Zip Code)			

								ATION.						
1. Has t	the issuer	sold or						redited i , if filing			offering'	?	Yes ⊠	No
2. What	. What is the minimum investment that will be accepted from any individual?										\$ <u>N/A</u>	<u> </u>		
3. Does	the offer	ing pern	nit joint	ownersł	nip of a s	single ui	nit:						Yes	No ⊠
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. N/A										with sales r or dealer ore than five				
Full Name	e (Last IIa	iiie iiist	, ii iiiuiv	iuuai)										
Business	or Reside	nce Add	ress (Nu	ımber ar	nd Street	t, City, S	State, Zi	p Code)						
Name of A	Associate	d Broke	r or Dea	ler									•	
States in V													_] All Career
(Cneck "A		[AZ]	K indivi [AR]		(CO]			[DC]	[FL]	[GA]	[HI]	[ID]		All States
[IL]		[IA]	[KS]	[KY]	[LA]	[ME]		[MA]	[MI]	[MN]	[MS]	[MO]		
[MT]		[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
[RI]		[SD]	[TN]	[TX]	[UT]	[VT]		[WA]			[WY]			
Full Name					[]	£ 3	[]	[]		£		J		
	<u> </u>													
Business	or Reside	nce Add	ress (Nu	ımber ar	nd Street	t, City, S	State, Zi	p Code)						
Name of A	Associate	d Broke	r or Dea	ler										
States in \											•			
•					•								L	J All States
[AL]		-	-		[CO]			[DC]	[FL]	[GA]	[HI]	[ID]		
[IL]		[IA]	[KS]	[KY]	[LA]	[ME]	[MD]		[MI]	[MN]	[MS]	[MO]		
[MT]		[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND] [WA]	[OH]	[OK]	[OR]	[PA]		
[RI]					[01]	[• 1]	[\ \ \ \]	[WA]	[** *]	[** 1]	[**1]	[i K]		
Full Name	e (Last na	me first	, if indiv	ridual)										
Business	or Reside	nce Add	ress (Nu	ımber ar	nd Street	, City, S	State, Zi	p Code)						
Name of A	Associate	d Broke	r or Dea	ler										
States in \													Г	All States
	(I States							[DC]			[HI]	[ID]		
[IL]		[IA]	[KS]	[KY]	[LA]	[ME]		[MA]	[MI]	[MN]	[MS]	[MO]		
[MT]		[NV]	[NH]	[NJ]		[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
[RI]		[SD]	[TN]		[UT]						[WY]			

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS $\,$

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box □ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.					
	Type of Security	(Aggreg Offering		An	nount Already Sold
	Debt	\$	()	\$	0
	Equity	\$	1,958,5	530.00	\$_1	,958,530.00
	Convertible Securities (including warrants)	\$			\$	
	Partnership Interests	\$)	\$	0
	Other (Specify)	\$_	()	\$	0
	Total		1,958,	530.00	\$1	,958,530.00
	Answer also in Appendix, Column 3, if filing under ULOE					
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if the answer is "none" or "zero."		Numb	oer		Aggregate
			Invest	ors		ollar Amount of Purchases
	Accredited Investors		12		\$	1,604,510.00
	Non-accredited Investors		14		\$	354,020.00
	Total (for filings under Rule 504 only)				<u>\$</u>	
	Answer also in Appendix, Column 4, if filing under ULOE				-	
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Type of offering		Type Secur		D	ollar Amount Sold
	Rule 505		N/A		\$	N/A
	Regulation A		N/A		\$	N/A
	Rule 504		N/A		\$	N/A
	Total		N/A		\$	N/A
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securithis offering. Exclude amounts relating solely to organization expenses of the issuer. The information be given as subject to future contingencies. If the amount of an expenditure is not known, furnish estimate and check the box to the left of the estimate.	ation an	may	_		
	Transfer Agent's Fees	•••••			\$	0
	Printing and Engraving Costs				\$	0
	Legal Fees			\boxtimes	\$	5,000.00
	Accounting Fees				\$	0
	Engineering Fees				\$	0
	Sales Commissions (specify finder's fees separately)				\$	0
	Other Expenses (identify)				\$	0
	Total			⊠	\$	5,000.00
	1 Otal	•••••		لبت		

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

b. Enter the difference between the aggregate offering price given in response to Part C-Question 1

5.

	cotal expenses furnished in response to Part C-Question 4.a. This difference is the "adjusted gross eeds to the issuer."			\$ <u>1,953,530.00</u>
each chec	cate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for of the purposes shown. If the amount for any purpose is not known, furnish an estimate and k the box to the left of the estimate. The total of the payments listed must equal the adjusted gross eeds to the issuer set forth in response to Part C-Question 4.b. above.			
		Payments Officer		
		Directors Affiliate	, &	Payments To Others
	Salaries and fees	\$_0		\$0
	Purchase of real estate	\$ 0		\$0
	Purchase, rental or leasing and installation of machinery and equipment	\$ <u>0</u>		\$0
	Construction or leasing of plant buildings and facilities	\$ <u> </u>		\$0
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	\$ <u>0</u>		\$0
	Repayment of indebtedness	\$0		\$0
	Working capital	\$0	×	\$ <u>1,953,530.00</u>
	Other (specify) (Settlement of Claim)	\$0		\$0
	Column Totals	\$ <u> </u>	\boxtimes	\$ <u>1,953,530.00</u>
	Tatal Daymanta Listed (column totals added)	Ø	\$ 1	953 530 00

D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b) (2) of Rule 502.

	/)	
Issuer (Print or Type)	Signature	Date
PalletOne, Inc.	100	October , 2006
Name of Signer (Print or Type)	Title of Signer (Print or Type	2)
Casey A. Fletcher	Vice President	

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).

	E. STATE SIGNATURE							
1.		resently subject to any of the disqualification pro		Yes	No 🗵			
	See Appendi	ix, Column 5, for state response.						
2.	 The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law. 							
3.	 The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees. 							
4.		ssuer is familiar with the conditions that must be s which this notice is filed and understands that the lat these conditions have been satisfied.						
	The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.							
lss	uer (Print or Type)	Signature	Date					
Pal	letOne, Inc.		October 6, 2006					
	me of Signer (Print or Type)	Title of Signer (Print or Type)						
Ca	sey A. Fletcher	Vice President						

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1		2	3		4						
	accredite in (Pa	sell to non- ed investors State art B- em 1)		Туре	Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)						
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount				
AL											
AK											
AZ											
AR											
CA											
СО											
CT											
DE											
DC											
FL	х		Common Stock \$1,690,160.00	8	\$1,513,150.00	5	\$177,010.00	No			
GA	х		Common Stock \$51,390.00	1	\$22,840.00	2	\$28,550.00	No			
ні											
ID											
IL											
IN											
IA											
KS											
KY											
LA											
ME	х		Common Stock \$22,840.00	0		1	\$22,840.00	No			
MD											

APPENDIX

1		2	3		5			
	accredite in (Pa	sell to non- ed investors State art B- em 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Туре	Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)			
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	
MA								
MI								
MN								
MS								
МО								
MT								
NE								
NV					, , , , , , , , , , , , , , , , , , , ,			
NH								
NJ								
NM								
NY								
NC	Х	-	Common Stock \$114,200.00	3	\$68,520.00	2	\$45,680.00	No
ND								
ОН								
ок								
OR			·					
PA								
RI								
SC								
SD								
TN								

APPENDIX

1	2 3				4			5
	accredit in (P	o sell to non- ed investors State Part B- em 1)	Type of security and aggregate offering price offered in state (Part C- Item 1)	Туре	Type of investor and amount purchased in State (Part C-Item 2)			Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	
TX	X		Common Stock \$34,260.00	0		2	\$34,260.00	No
UT								
VT								
VA	х		Common Stock \$22,840.00	0		1	\$22,840.00	No
WA								
wv								
WI	х		Common Stock \$22,840.00	0		1	\$22,840.00	No
WY								
PR								

R-147132